



# CERTIFICATION REGISTRATION FORM

## Instructor Tiffany Lodes - Lotus Movement

**Fax:** completed registration form to 206-297-4261 attention Tiffany

**E-mail:** tiff@lotusmovement.com

**Mail or drop by:** send the completed registration form with your check, money order :  
Bodycenter Studios Attn: Tiffany Lodes 4250 8th avenue NW #100 Seattle WA 98107

**(Check or money order should be made payable to: Lotus Movement or Tiffany Lodes.)**

- Tuition is required for registration to be complete.
- A registration form is required for each training.
- You are not registered unless you receive a registration confirmation email response.

### Section A: General Information

<b>DATE:</b>
<b>Name:</b>
<b>Date of Birth:</b>
<b>Street Address:</b>
<b>City, State, Zip Country:</b>
<b>Phone:</b>
<b>Email Address:</b>
<b>Occupation:</b>

### Section B: Class & Workshop you are registering for

<b>Course Title:</b>
<b>Location:</b>

### Section C: Short Health Questionnaire

**Health History – Please check all that apply:**

spinal surgeries / disorders - list:

muscle / joint pain - list:

muscle / bone injuries - list:

sprains / strains - list:

cesarians – please list dates if “yes” to cesarians

high blood pressure low blood pressure

diabetes prosthesis asthma / lung problems

pregnancies

Are you pregnant now? If “Yes,” how many weeks?

Please list all medications and any supplements you are taking.

Do you have any medical / health conditions which will prevent your full participation in the class?

**Section D: Method of Payment** *(If you have already paid the tuition fee, please note this here too. Thank you!)*

Check / Money order (payable to Lotus Movement or Tiffany Lodes.)

Credit Card payable in person, invoiced or online

Pay online <https://squareup.com/store/Lotusmovement>

**Refunds and Cancellation**

Lotus Movement or Yamuna Studio cancellation of a class or workshop: Full refund or Apply 100% tuition to another class.

Lotus Movement & Yamuna Studio are not liable for travel and accommodation expenses.

Make sure that all of your arrangements are refundable or changeable or both.

**Student cancellations:**

6 weeks or more prior to class: 100% Tuition Refund.

2-5 weeks notice prior to class: 50% Tuition Refund.

0-14 days notice: 0% Tuition Refund.

\*Cases of extreme emergency will be reviewed on an individual basis.

\*All refunds may be applied to another class which must be taken within 1 calendar year of cancelled class.

\*Cancellations must be received in writing.

**Section E: Emergency Contact**

Please give the name of a person, either a relative or friend who lives in the United States, who can be contacted in the case of emergency.

**Section F Questionare:**

Have you ever applied to or attended YBR classes previously? If "Yes," please list date of Application or date of enrollment.

Modalities you are certified / licensed in and the date you received your certificate / license:

How did you learn about Yamuna® Body Rolling?

On a separate sheet of the paper, please answer the following questions, limiting your answers to one paragraph per question. **Type or print in ink.**

1. Assess your strengths and weaknesses as a student and as a future health professional.
2. What are your reasons for choosing to learn Yamuna® Body Rolling?
3. Please describe in general your existing clientele, if you have one.
4. Please describe any previous hands on experience that you might have.

**Note:** it is a requirement that you experience classes from a Certified YBR® practitioner before you enter the program. Please submit documentation of those classes. If you have any difficulty with taking classes prior to entering our certification classes please contact Tiffany Lodes 206•696•2601 [www.lotusmovement.com](http://www.lotusmovement.com). I will be happy to assist you in fulfilling this pre-requisite.



### **Agreement of Release and Waiver of Liability**

Please read, sign and return this waiver along with your registration form and health questionnaire.

I, \_\_\_\_\_ hereby agree to the following:

- 1) That I am participating in a YBR® training class or YBR® Workshops offered by Lotus Movement & Yamuna Studio, Inc. during which I will receive information and instruction about YBR® . I recognize that this fitness program involves physical contact and requires physical exertion which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.
- 2) I understand that it is my responsibility to consult with a physician prior to and regarding my participation in the YBR® training classes or workshops. I represent and warrant that I am physically fit and I have no medical condition which would prevent my full participation
- 3) In consideration for being permitted to participate in YBR® training classes or workshops, I agree to assume full responsibility for any risks, injuries or damages, known or unknown which I might incur as a result of participating in the program.
- 4) I understand that I have the right and duty to inspect the mats, facilities and equipment to be used and if I believe that anything is unsafe or beyond my capability I will immediately advise the instructor or supervisor of such condition(s) and refuse to participate.
- 5) In further consideration of being permitted to participate in the YBR® training classes, programs or workshops, I knowingly, voluntarily and expressly waive any claim I may have against Lotus Movement, Yamuna Studio, Inc., its officers, instructors or employees for injury or damages that I may sustain as a result of participating in the program.
- 6) I, my heirs or legal representatives foresee release, waive, discharge, and covenant not to sue Lotus Movement, Yamuna Studio, Inc. its officers, instructors or employees for any injury or death caused by their negligence or other acts.
- 7) I understand that until I complete all of the YBR® requirements I am not a certified practitioner and will not teach or use the work with my clients.

I have read the above release and waiver of liability and fully understand its contents as well as the Refund/ Cancellation Policies. I voluntarily agree to the terms and conditions stated above.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please print your name:** \_\_\_\_\_